

PIGEON FALLS HEALTH CARE CENTER

13197 CHURCH STREET, P.O. BOX 310

PIGEON FALLS 54760 Phone: (715) 983-2293

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/02): 37

Total Licensed Bed Capacity (12/31/02): 37

Number of Residents on 12/31/02: 32

Ownership:

Highest Level License:

Operate in Conjunction with CBRF? No

Title 18 (Medicare) Certified? No

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 35

County

Skilled

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)			%
			Primary Diagnosis	%	Age Groups	%	Less Than 1 Year			
Home Health Care	No						1 - 4 Years			31.3
Supp. Home Care-Personal Care	No						More Than 4 Years			53.1
Supp. Home Care-Household Services	No		Developmental Disabilities	0.0	Under 65	3.1				15.6
Day Services	No		Mental Illness (Org./Psy)	62.5	65 - 74	6.3				-----
Respite Care	Yes		Mental Illness (Other)	12.5	75 - 84	46.9				100.0
Adult Day Care	No		Alcohol & Other Drug Abuse	0.0	85 - 94	31.3				*****
Adult Day Health Care	No		Para-, Quadra-, Hemiplegic	0.0	95 & Over	12.5				Full-Time Equivalent
Congregate Meals	No		Cancer	0.0		-----				Nursing Staff per 100 Residents
Home Delivered Meals	No		Fractures	0.0		100.0				(12/31/02)
Other Meals	No		Cardiovascular	3.1	65 & Over	96.9				-----
Transportation	No		Cerebrovascular	3.1		-----				RNs
Referral Service	No		Diabetes	0.0	Sex	%				LPNs
Other Services	No		Respiratory	0.0		-----				Nursing Assistants,
Provide Day Programming for			Other Medical Conditions	18.8	Male	53.1				Aides, & Orderlies
Mentally Ill	No			-----	Female	46.9				45.8
Provide Day Programming for				100.0		-----				
Developmentally Disabled	No					100.0				

Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total	%
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Resi- dents	Of All
Int. Skilled Care	0	0.0	0	1	4.2	136	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	1	3.1
Skilled Care	0	0.0	0	19	79.2	114	0	0.0	0	7	87.5	120	0	0.0	0	0	0.0	0	0	0.0	26	81.3
Intermediate	---	---	---	4	16.7	93	0	0.0	0	1	12.5	102	0	0.0	0	0	0.0	0	0	0.0	5	15.6
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	0	0.0		24	100.0		0	0.0		8	100.0		0	0.0		0	0.0		0	0.0	32	100.0

Admissions, Discharges, and Deaths During Reporting Period						Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02			

Percent Admissions from:						Activities of		% Needing Assistance of	Total
						Daily Living (ADL)		One Or Two Staff	Number of Residents
								% Totally Dependent	
Private Home/No Home Health	19.0						Independent		
Private Home/With Home Health	0.0					Bathing	0.0	75.0	32
Other Nursing Homes	19.0					Dressing	12.5	71.9	32
Acute Care Hospitals	52.4					Transferring	28.1	59.4	32
Psych. Hosp.-MR/DD Facilities	0.0					Toilet Use	15.6	65.6	32
Rehabilitation Hospitals	0.0					Eating	53.1	31.3	32
Other Locations	9.5					*****			
Total Number of Admissions	21					Continence		% Special Treatments	%
Percent Discharges To:						Indwelling Or External Catheter		3.1	Receiving Respiratory Care
Private Home/No Home Health	11.5					Occ/Freq. Incontinent of Bladder		75.0	Receiving Tracheostomy Care
Private Home/With Home Health	3.8					Occ/Freq. Incontinent of Bowel		37.5	Receiving Suctioning
Other Nursing Homes	7.7								Receiving Ostomy Care
Acute Care Hospitals	3.8					Mobility			Receiving Tube Feeding
Psych. Hosp.-MR/DD Facilities	0.0					Physically Restrained		0.0	Receiving Mechanically Altered Diets
Rehabilitation Hospitals	0.0								
Other Locations	7.7					Skin Care			Other Resident Characteristics
Deaths	65.4					With Pressure Sores		0.0	Have Advance Directives
Total Number of Discharges						With Rashes		0.0	Medications
(Including Deaths)	26								Receiving Psychoactive Drugs

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

		This Facility	Ownership: Government		Bed Size: Under 50		Licensure: Skilled		All Facilities
		%	Peer Group	Ratio	%	Ratio	Peer Group	Ratio	% Ratio
Occupancy Rate: Average Daily Census/Licensed Beds		93.2	86.3	1.08	93.9	0.99	83.3	1.12	85.1 1.09
Current Residents from In-County		90.6	75.8	1.20	73.6	1.23	75.8	1.19	76.6 1.18
Admissions from In-County, Still Residing		42.9	27.1	1.58	35.3	1.21	22.0	1.95	20.3 2.11
Admissions/Average Daily Census		60.0	96.4	0.62	67.9	0.88	118.1	0.51	133.4 0.45
Discharges/Average Daily Census		74.3	98.7	0.75	73.6	1.01	120.6	0.62	135.3 0.55
Discharges To Private Residence/Average Daily Census		11.4	41.6	0.27	16.7	0.69	49.9	0.23	56.6 0.20
Residents Receiving Skilled Care		84.4	91.9	0.92	82.0	1.03	93.5	0.90	86.3 0.98
Residents Aged 65 and Older		96.9	87.8	1.10	93.3	1.04	93.8	1.03	87.7 1.11
Title 19 (Medicaid) Funded Residents		75.0	67.7	1.11	77.4	0.97	70.5	1.06	67.5 1.11
Private Pay Funded Residents		25.0	19.7	1.27	15.9	1.57	19.3	1.30	21.0 1.19
Developmentally Disabled Residents		0.0	0.6	0.00	0.4	0.00	0.7	0.00	7.1 0.00
Mentally Ill Residents		75.0	47.5	1.58	59.4	1.26	37.7	1.99	33.3 2.25
General Medical Service Residents		18.8	15.9	1.18	13.0	1.45	18.1	1.04	20.5 0.91
Impaired ADL (Mean)		48.8	47.8	1.02	44.5	1.10	47.5	1.03	49.3 0.99
Psychological Problems		43.8	56.9	0.77	49.0	0.89	52.9	0.83	54.0 0.81
Nursing Care Required (Mean)		3.1	5.9	0.53	5.6	0.55	6.8	0.46	7.2 0.43